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TAYLOR &
ZAFMAN

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AP12 Rec'd PCT/PTO 16 MAY 2007

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FACSIMILE TRANSMITTAL SHEET (TRANSMITTAL TO PTO)

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 Firm Name: U.S. PATENT AND TRADEMARK OFFICE
 Fax Number: (571) 273-8300 Telephone No.: (866) 217-9197
 From: Stephen M. De Klerk
 Date: May 16, 2007 Time: _____
 Operator: Linda Brost Atty. Docket No.: 007751.P006
 Number of pages including cover sheet: 4
 In Re Patent Application of: Elke Zakel, et al.
 Application No.: 10/581,819 Confirmation No.: 7190
 Filed: June 2, 2006
 For: METHOD AND DEVICE FOR ALTERNATELY CONTACTING
TWO WAFERS

Enclosed are the following documents: Three (3) fee transmittals, representing:
(1) Payment of \$575.00 for entity change fees (small to large) pertaining to
Change of Entity Status e-filed on 5/14/07; (2) payment of \$130.00 for Response
to Notification of Missing Requirements e-filed on 5/14/07; (3) payment of \$120.00
for one-month extension of time regarding Response. Fees were not paid at
time of filing because of error in EFS system; received message stating "Maxi-
mum fee code count allowed for specified name/number has been exceeded."
Instructions received from EFS techs to submit fee transmittals via facsimile.

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(Rev. 11/23/97)

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BLAKELY SOKOLOFF TAYLOR

002

MAY 16 2007

PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0D32
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2007 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

675.00

Complete If Known

Application Number	10/681,819
Filing Date	June 2, 2006
First Named Inventor	Elke Zakei
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	007751.P005

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, et al.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Dcsign	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee (\$)
- 20 or HP =	x	=		50	25

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=		200	100

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Entity status change fee, small to large entity; filing/extra claims

Fee Paid (\$)
\$675.00

SUBMITTED BY

Signature	/ Stephen M. De Klerk /	Registration No. (Attorney/Agent) 46,503	Telephone (408) 720-8300
Name (Print/Type)	Stephen M. De Klerk		Date May 16, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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BLAKELY SOKOLOFF TAYLOR

PTO/SB/17 (05-07)
Approved for use through 05/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
130.00

Complete If Known

Application Number	10/581,819
Filing Date	June 2, 2006
First Named Inventor	Elke Zabel
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	007751.P005

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, et al.

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Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity	Fee (\$)
	50

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = _____ x _____ = _____

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Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 - _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Late filing surcharge for Oath/Decl.; Response to Not. of Missing Req.

Fee Paid (\$)

\$130.00

SUBMITTED BY

Signature	/ Stephen M. De Klerk /	Registration No. (Attorney/Agent) 48,503	Telephone (408) 720-8300
Name (Print/Type)	Stephen M. De Klerk		Date May 18, 2007

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MAY 16 2007

PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2007 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

120.00

Complete If Known

Application Number

10/581,819

Filing Date

June 2, 2006

First Named Inventor

Elke Zabel

Examiner Name

Not Yet Assigned

Art Unit

Not Yet Assigned

Attorney Docket No.

007751.P005

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, et al.

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	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small EntityFee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total ClaimsExtra Claims Fee (\$) Fee Paid (\$)Multiple Dependent ClaimsFee (\$) Fee Paid (\$)

- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. ClaimsExtra Claims Fee (\$) Fee Paid (\$)

- 3 or HP = _____ x _____ = _____

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Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fee Paid (\$)

Other (e.g., late filing surcharge): One-month extension fee: Response to Notice of Missing Requirements

\$120.00

SUBMITTED BY

Signature	/ Stephen M. De Klerk /	Registration No. (Attorney/Agent) 46,503	Telephone (408) 720-8300
Name (Print/Type)	Stephen M. De Klerk		Date May 18, 2007

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